

## CORE Claims Team – Correct Coding Initiative (CCI) Edit Firing Report

### Purpose:

Report IAMC4200-R001 is generated to review claims that Bloodhound has determined have paid erroneously. The IME Core Claims Team reviews each item from the report to determine if adjustments have already been done to take back the payment.

### Identification of Roles:

Operations Coordinator – Reviews and completes each CCI Edit Firing e-form

Claims Research Examiner – Serves as a back-up to the Operations Coordinator

Operations Team Lead and Operations Manager – Monitors workload and ensures that work is completed timely

### Performance Standards:

none

### Path of Business Procedure:

Step 1: Report IAMR4200-R001 is sent to Computer Output to Laser Disk (COLD) from Medicaid Management Information System(MMIS)

Step 2: OnBase creates e-forms from the report and adds to a queue in workflow

Step 3: The oldest e-form is selected and MMIS is reviewed to determine if an adjustment has already been completed on the line item being researched

- a. If an adjustment or recoupment was previously completed users will select a task in MMIS to complete the e-form
- b. If an adjustment has not been completed on the line item the user will select a task in OnBase to create the adjustment e-form

Step 4: The edit firing portal can be reviewed if there is a question on why the Correct Coding Initiative (CCI) firing edit posted on the procedure code

Step 5: After adjustment creation select the adjustment reason and adjustment type

Step 6: Save the request

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Step 7: The adjustment request will be sent to OnBase workflow for processing

### Forms/Reports:

CCI Edit Firing E-Form  
IAMC4200-R001-daily  
Internal Adjustment E-form

### RFP References:

none

### Interfaces:

none

### Attachments:

**CCI Edit Firing Error**

**Details**

TCN: [REDACTED]

Line Number: [REDACTED]

Firing Number: [REDACTED]

Savings: [REDACTED]

Comments: [REDACTED]

**General Info**

State ID: [REDACTED]

Prov Number: [REDACTED]

NPI Number: [REDACTED]

Date Received: [REDACTED]


CCI Edit Firing E-Form

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**Credit/Adjustment Request**

**Request Type:** ☐ Adjustment ☐ Credit

**Claim Type:** ☐ History ☐ Live

**Requesting Unit:** CORE 


**TCN:**

**Provider Number:**


**NPI Number:**


**Provider Name:**

**State ID:**

**Adjust/Credit Reason:** ---- 

**CCN:**

**User ID:** 

**Comments:** 

**Adjusted TCN:**

**DCN:**  **Contact Log #:**

Internal Credit/Adjustment E-Form